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Bib Data Sheet

CONFIRMATION NO. 3283

<b>SERIAL NUMBER</b> 09/183,566	<b>FILING DATE</b> 10/30/1998 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1645	<b>ATTORNEY DOCKET NO.</b> PXE-002P1.US		
<b>APPLICANTS</b> PAMELA R. CONTAG, SAN JOSE, CA; CHRISTOPHER H. CONTAG, SAN JOSE, CA; DAVID A. BENARON, PORTOLA VALLEY, CA;						
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CIP OF 08/844,336 04/18/1997 AND CLAIMS BENEFIT OF 60/015,633 04/19/1996						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 11/23/1998						
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged		<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 248	<b>INDEPENDENT CLAIMS</b> 21
<b>ADDRESS</b> 20855						
<b>TITLE</b> BIODETECTORS TARGETED TO SPECIFIC LIGANDS						
<b>FILING FEE RECEIVED</b> 504	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			



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**APPLICANTS**

PAMELA R. CONTAG, SAN JOSE, CA;  
 CHRISTOPHER H. CONTAG, SAN JOSE, CA;  
 DAVID A. BENARON, PORTOLA VALLEY, CA;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 08/844,336 04/18/1997  
 and claims benefit of 60/015,633 04/19/1996

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 24	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

20855

**TITLE**

BIODETECTORS TARGETED TO SPECIFIC LIGANDS

<b>FILING FEE RECEIVED</b> 804	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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